

Seattle Police Department Evidence/Property Release Authorization Form

Case #

Date

Form 13.9(B), Rev 12/21

Name:Unit #:			Serial #:	
	Property Report #	Item #	Description	
1				
2				
4				
5 6				
7				
Re	Owner/Agent		on, destruction, conversion) n comments on page 2)	
Pe	erson(s) Authorized to Re	-	,	
	Name:			
	Address:			
	Phone:			
	Email:			
Ov	vner Notified by: (REQUII	RED) Date	Notified: (REQUIRED)	
	Hand Served Notice			
	US Mail			

Firearms Release (REQUIRED for all firearms)

Sheena Henderson Act Notification Required?

Notification Date:

Notification Time:

Comments: